



Recreational Vehicle Unit Certification Format

Name of Retailer

Mailing Address County

City State Zip Code Phone#

No.	SERIAL#	KY "B" SEAL #	DATE MFG	MODEL	SIZE	CONSUMERS NAME & ADDRESS

This form must be used in reporting units to Manufactured Housing. The form should be completed in duplicate with the original mailed to the Office of Housing, Buildings & Construction – Manufactured Housing Section at the end of each month, **no later than the first week** of each month, and the copy retained by the Retailer.

Person Authorized to certify these units

Date

